§4.78

[53 FR 30262, Aug. 11, 1988]

§4.78 Computing aggravation.

In determining the effect of aggravation of visual disability, even though the visual impairment of only one eye is service connected, evaluate the vision of both eyes, before and after suffering the aggravation, and subtract the former evaluation from the latter except when the bilateral vision amounts to total disability. In the event of subsequent increase in the disability of either eye, due to intercurrent disease or injury not associated with the service, the condition of the eyes before suffering the subsequent increase will be taken as the basis of compensation subject to the provisions of §3.383(a) of this chapter.

[29 FR 6718, May 22, 1964, as amended at 43 FR 45354, Oct. 2, 1978]

§4.79 Loss of use of one eye, having only light perception.

Loss of use or blindness of one eye, having only light perception, will be held to exist when there is inability to recognize test letters at 1 foot (.30m.) and when further examination of the eyes reveals that perception of objects, hand movements or counting fingers cannot be accomplished at 3 feet (.91m.), lesser extents of visions, particularly perception of objects, hand movements, or counting fingers at distances less than 3 feet (.91 m.), being considered of negligible utility. With visual acuity 5/200 (1.5/60) or less or the visual field reduced to 5° concentric contraction, in either event in both eyes, the question of entitlement on account of regular aid and attendance will be determined on the facts in the individual case.

[43 FR 45354, Oct. 2, 1978]

§ 4.80 Rating of one eye.

Combined ratings for disabilities of the same eye should not exceed the amount for total loss of vision of that eye unless there is an enucleation or a serious cosmetic defect added to the total loss of vision.

§§ 4.81-4.82 [Reserved]

§4.83 Ratings at scheduled steps and distances.

In applying the ratings for impairment of visual acuity, a person not having the ability to read at any one of the scheduled steps or distances, but reading at the next scheduled step or distance, is to be rated as reading at this latter step or distance. That is, a person who can read at 20/100 (6/30) but who cannot at 20/70 (6/21), should be rated as seeing at 20/100 (6/30).

 $[41\ FR\ 34257,\ Aug.\ 13,\ 1976,\ as\ amended\ at\ 43\ FR\ 45354,\ Oct.\ 2,\ 1978]$

§4.83a Impairment of central visual acuity.

The percentage evaluation will be found from table V by intersecting the horizontal row appropriate for the Snellen index for one eye and the vertical column appropriate to the Snellen index of the other eye. For example, if one eye has a Snellen index of 5/200 (1.5/60) and the other eye has a Snellen index of 20/70 (6/21), the percentage evaluation is found in the third horizontal row from the bottom and the fourth vertical column from the left. The evaluation is 50 percent and the diagnostic code 6073.

[41 FR 11297, Mar. 18, 1976, as amended at 43 FR 45354, Oct. 2, 1978]

§ 4.84 Differences between distant and near visual acuity.

Where there is a substantial difference between the near and distant corrected vision, the case should be referred to the Director, Compensation and Pension Service.

[40 FR 42537, Sept. 15, 1975]

§ 4.84a Schedule of ratings—eye.

DISEASES OF THE EYE

		Rat- ing
6000	Uveitis	
6001	Keratitis	
6002	Scleritis	
6003	Iritis	
6004	Cyclitis	
6005	Choroiditis	
6006	Retinitis	
6007	Hemorrhage, intra-ocular, recent	

Department of Veterans Affairs

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DISEASES OF THE EYE—Continued

DISEASES OF THE EYE—Continued

	_		
	Rat- ing		Rat- ing
6008 Retina, detachment of		6023 Eyebrows, loss of, complete, unilateral or bi-	
6009 Eye, injury of, unhealed:		lateral	10
The above disabilities, in chronic form, are to be		6024 Eyelashes, loss of, complete, unilateral or bi-	
rated from 10 percent to 100 percent for im-		lateral	10
pairment of visual acuity or field loss, pain,		6025 Epiphora (lacrymal duct, interference with,	
rest-requirements, or episodic incapacity, com-		from any cause):	
bining an additional rating of 10 percent during		Bilateral	20
continuance of active pathology. Minimum rat-		Unilateral	10
ing during active pathology	10	6026 Neuritis, optic:	
6010 Eye, tuberculosis of, active or inactive:		Rate underlying disease, and combine impair-	
Active	100	ment of visual acuity or field loss.	
Inactive: See §§ 4.88b and 4.89.		6027 Cataract, traumatic:	
6011 Retina, localized scars, atrophy, or irregular-		Preoperative.	
ities of, centrally located, with irregular, duplicated		Rate on impairment of vision.	
enlarged or diminished image:		Postoperative.	
Unilateral or bilateral	10	Rate on impairment of vision and aphakia.	
6012 Glaucoma, congestive or inflammatory:		6028 Cataract, senile, and others:	
Frequent attacks of considerable duration; during	400	Preoperative.	
continuance of actual total disability	100	Rate on impairment of vision.	
Or, rate as iritis, diagnostic Code 6003.		Postoperative.	
6013 Glaucoma, simple, primary, noncongestive:		Rate on impairment of vision and aphakia. 6029 Aphakia:	
Rate on impairment of visual acuity or field loss.		Bilateral or unilateral	30
Minimum rating	10	Note: The 30 percent rating prescribed for	30
6014 New growths, malignant (eyeball only):		aphakia is a minimum rating to be applied to	
Pending completion of operation or other indi-	400	the unilateral or bilateral condition and is not	
cated treatment	100	to be combined with any other rating for im-	
Healed; rate on residuals.		paired vision. When only one eye is aphakic,	
6015 New growths, benign (eyeball and adnexa,		the eye having poorer corrected visual acuity	
other than superficial)	10	will be rated on the basis of its acuity without	
Rate on impaired vision, minimum Healed; rate on residuals.	10	correction. When both eyes are aphakic, both	
6016 Nystagmus, central	10	will be rated on corrected vision. The cor-	
6017 Conjunctivitis, trachomatous, chronic:	10	rected vision of one or both aphakic eyes will	
Active; rate for impairment of visual acuity; min-		be taken one step worse than the ascertained	
imum rating while there is active pathology	30	value, however, not better than 20/70 (6/21).	
Healed; rate on residuals, if no residuals	0	Combined ratings for disabilities of the same	
6018 Conjunctivitis, other, chronic:		eye should not exceed the amount for total	
Active, with objective symptoms	10	loss of vision of that eye unless there is an	
Healed; rate on residuals, if no residuals	0	enucleation or a serious cosmetic defect	
6019 Ptosis, unilateral or bilateral:		added to the total loss of vision.	
Pupil wholly obscured.		6030 Accommodation, paralysis of	20
Rate equivalent to 5/200 (1.5/60).		6031 Dacryocystitis	
Pupile one-half or more obscured.		Rate as epiphora.	
Rate equivalent to 20/100 (6/30).		6032 Eyelids, loss of portion of:	
With less interference with vision.		Rate as disfigurement. (See diseases of the	
Rate as disfigurement.		skin.)	
6020 Ectropion:		6033 Lens, crystalline, dislocation of:	
Bilateral	20	Rate as aphakia.	
Unilateral	10	6034 Pterygium:	
6021 Entropion:		Rate for loss of vision, if any.	
Bilateral	20	6035 Keratoconus: To be evaluated on impairment	
Unilateral	10	of corrected visual acuity using contact lenses. NOTE: When contact lenses are medically re-	
6022 Lagophthalmos:		quired for keratoconus, either unilateral or bi-	
Bilateral	20	lateral, the minimum rating will be 30 percent.	
Unilateral	10	ateral, the minimum rating will be 30 percent.	

TABLE IV—TABLE FOR RATING BILATERAL BLINDNESS OR BLINDNESS COMBINED WITH HEARING LOSS WITH DICTATOR'S CODE AND 38 CFR CITATIONS

		Vision other eye		Plus service-connected Hearing loss					
Vision one eye	5/200 (1.5/60) or less	Light perception only	No light perception or anatomical loss	Total deafness one ear	10% or 20% at least one ear SC	30% at least one ear SC	40% at least one ear SC	60% or more at least one ear SC	
5/200 (1.5/60) or less.	L ¹ Code LB-1 38 CFR 3.350(b)(2).	L+½¹ Code LB-2 38 CFR 3.350(f)(2)(i).	M Code MB–2 a or b 38 CFR 3.350(f)(2)(ii).	Add ½ step Code PB-1 38 CFR 3.350(f)(2)(iv).	No additional SMC.	Add a full step Code PB-3 38 CFR 3.350(f)(2)(vi).	Add a full step Code PB-3 38 CFR 3.350(f)(2)(vi).	O Code OB-1 38 CFR 3.350(e)(1)(iii)	
Light perception only.		M Code MB-1 a 38 CFR 3.350(c)(1)((iv).	M+½ Code MB-3 a or b 38 CFR 3.350(f)(iii).	O Code OB-2 38 CFR 3.350(e)(1)(iv).	Add ½ step Code PB-2 38 CFR 3.350(f)(2)(v).	Add a full step Code PB-3 38 CFR 3.350(f)(2)(iv).	O Code OB-2 38 CFR 3.350(e)(1)(iv).	O Code OB-1 38 CFR 3.350(e)(1)(iii)	
No light perception or anatomical loss.			N Code NB-1 a-b or c 38 CFR 3.350(d)(4).	O Code OB-2 38 CFR 3.350(e)(1)(iv).	Add ½ step Code PB-2 38 CFR 3.350(f)(2)(v).	Add full step Code PB-3 38 CFR 3.350(f)(2)(vi).	O Code OB-2 38 CFR 3.350(e)(1)(iv).	O Code OB-1 38 CFR 3.350(e)(1)(iii)	

¹With need for aid and attendance qualifies for Subpar. m. code MB-1, b; 38 CFR 3.350(c)(1)(v).

(Authority: 38 U.S.C. 1115)

NOTE.—(1) Any of the additional SMC payable under Dictator's Codes PB–1, PB–2, or PB–3 is not to exceed the rate payable under Subpar. O. (2) If in addition to any of the above the veteran has the service-connected loss or loss of use of an extremity, additional SMC is payable, not to exceed the rate payable under Subpar. O. See Dictator's Codes PB–4, PB–5, PB–6, and 38 CFR 3.350(f)(2)(viii) (A), (B), (C).

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IMPAIRMENT OF CENTRAL VISUAL ACUITY

		Rat- ing
6061	Anatomical loss both eyes	5 100
6062	Blindness in both eyes having only light per-	
	tion	5 100
Α	natomical loss of 1 eye:	
6063	In the other eye 5/200 (1.5/60)	5 100
6064	In the other eye 10/200 (3/60)	6 90
6064	In the other eye 15/200 (4.5/60)	680
6064	In the other eye 20/200 (6/60)	670
6065	In the other eye 20/100 (6/30)	6 60
6065	In the other eye 20/70 (6/21)	6 60
6065	In the other eye 20/50 (6/15)	⁶ 50
6066	In the other eye 20/40 (6/12)	6 40
В	lindness in 1 eye, having only light perception:	
6067	In the other eye 5/200 (1.5/60)	⁵ 100
6068	In the other eye 10/200 (3/60)	5 90
6068	In the other eye 15/200 (4.5/60)	5 80
6068	In the other eye 20/200 (6/60)	5 70
6069	In the other eye 20/100 (6/30)	5 60
6069	In the other eye 20/70 (6/21)	⁵ 50
6069	In the other eye 20/50 (6/15)	5 40
6070	In the other eye 20/40 (6/12)	5 30
V	ision in 1 eye 5/200 (1.5/60):	
6071	In the other eye 5/200 (1.5/60)	5 100
6072	In the other eye 10/200 (3/60)	90
6072	In the other eye 15/200 (4.5/60)	80
6072	In the other eye 20/200 (6/60)	70
6073	In the other eye 20/100 (6/30)	60
6073	In the other eye 20/70 (6/21)	50
6073	In the other eye 20/50 (6/15)	40
6074	In the other eye 20/40 (6/12)	30
V	ision in 1 eye 10/200 (3/60):	
6075	In the other eye 10/200 (3/60)	90
6075	In the other eye 15/200 (4.5/60)	80
6075	In the other eye 20/200 (6/60)	70
6076	In the other eye 20/100 (6/30)	60

IMPAIRMENT OF CENTRAL VISUAL ACUITY— Continued

		Rat- ing
6076	In the other eye 20/70 (6/21)	50
6076	In the other eye 20/50 (6/15)	40
6077	In the other eye 20/40 (6/12)	30
V	ision in 1 eye 15/200 (4.5/60):	
6075	In the other eye 15/200 (4.5/60)	80
6075	In the other eye 20/200 (6/60)	70
6076	In the other eye 20/100 (6/30)	60
6076	In the other eye 20/70 (6/21)	40
6076	In the other eye 20/50 (6/15)	30
6077	In the other eye 20/40 (6/12)	20
V	ision in 1 eye 20/200 (6/60):	
6075	In the other eye 20/200 (6/60)	70
6076	In the other eye 20/100 (6/30)	60
6076	In the other eye 20/70 (6/21)	40
6076	In the other eye 20/50 (6/15)	30
6077	In the other eye 20/40 (6/12)	20
	ision in 1 eye 20/100 (6/30):	
6078	In the other eye 20/100 (6/30)	50
6078	In the other eye 20/70 (6/21)	30
6078	In the other eye 20/50 (6/15)	20
6079	In the other eye 20/40 (6/12)	10
	ision in 1 eye 20/70 (6/21):	
6078		30
6078		20
6079	In the other eye 20/40 (6/12)	10
	ision in 1 eye 20/50 (6/15):	
6078		10
6079		10
	ision in 1 eye 20/40 (6/12):	0
ır	the other eye 20/40 (6/12)	0

⁵ Also entitled to special monthly compensation. ⁶ Add 10% if artificial eye cannot be worn; also entitled to special monthly compensation.

TABLE V—RATINGS FOR CENTRAL VISUAL ACUITY IMPAIRMENT [With Diagnostic Code]

	Vision in other eye									
Vision in one eye	20/40 (6/ 12)	20/50 (6/ 15)	20/70 (6/ 21)	20/100 (6/30)	20/200 (6/60)	15/200 (4.5/60)	10/200 (3/60)	5/200 (1.5/60)	Light perception only/anatomical loss	
20/40 (6/12)	0									
20/50 (6/15)	10 (6079)	10 (6078)								
20/70 (6/21)	10 (6079)	20 (6078)	30 (6078)							
20/100 (6/30)	10 (6079)	20 (6078)	30 (6078)	50 (6078)						
20/200 (6/60)	20 (6077)	30 (6076)	40 (6076)	60 (6076)	70 (6075)					
15/200 (4.5/60)	20 (6077)	30 (6076)	40 (6076)	60 (6076)	70 (6075)	80 (6075)				
10/200 (3/60)	30 (6077)	40 (6076)	50 (6076)	60 (6076)	70 (6075)	80 (6075)	90 (6075)			
5/200 (1.5/60)	30 (6074)	40 (6073)	50 (6073)	60 (6073)	70 (6072)	80 (6072)	90 (6072)	⁵ 100 (6071)		
Light per- ception only	⁵ 30	⁵ 40	⁵ 50	⁵ 60	⁵ 70	⁵ 80	⁵ 90	⁵ 100	⁵ 100	

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TABLE V—RATINGS FOR CENTRAL VISUAL ACUITY IMPAIRMENT—Continued [With Diagnostic Code]

					,	•					
		Vision in other eye									
Vision in one eye	20/40 (6/ 12)	20/50 (6/ 15)	20/70 (6/ 21)	20/100 (6/30)	20/200 (6/60)	15/200 (4.5/60)	10/200 (3/60)	5/200 (1.5/60)	Light perception only/anatomical loss		
	(6070)	(6069)	(6069)	(6069)	(6068)	(6068)	(6068)	(6067)	(6062)		
Anatomical loss of one eye	⁶ 40 (6066)	⁶ 50 (6065)	⁶ 60 (6065)	⁶ 60 (6065)	⁶ 70 (6064)	⁶ 80 (6064)	⁶ 90 (6064)	⁵ 100 (6063)	⁵ 100 (6061)		

ing

30 30 10

10

30

20

10

6080 Field vision, impairment of:

RATINGS FOR IMPAIRMENT OF FIFLD VISION

TOATH TOO T	OIC IIVII AIICIVII	ILLD	VIOIOIV
			Rat-

riomonymous nermanopsia	30
Field, visual, loss of temporal half:	
Bilateral	30
Unilateral	10
Or rate as 20/70 (6/21).	
Field, visual, loss of nasal half:	
Bilateral	20
Unilateral	10
Or rate as 20/50 (6/15).	
Field, visual, concentric contraction of:	
To 5°:	
Bilateral	100
Unilateral	30
Or rate as 5/200 (1.5/60).	
To 15° but not to 5°:	
Bilateral	70
Unilateral	20
Or rate as 20/200 (6/60).	
To 30° but not to 15°:	
Bilatoral	50

To 45° but not to 30°: Bilateral Unilateral Or rate as 20/70 (6/21): To 60° but not to 45°:

Or rate as 20/100 (6/30).

Bilateral Unilateral

Unilateral

Or rate as 20/50 (6/15).

Note (1): Correct diagnosis reflecting disease or injury should be cited.. Note (2): Demonstrable pathology commensu-

rate with the functional loss will be required. The concentric contraction ratings require contraction within the stated degrees, temporally; the nasal contraction may be less. The alternative ratings are to be employed when there is ratable defect of visual acuity, or a different impairment of the visual field in the other eye. Concentric contraction resulting from demonstrable pathology to 5 degrees or less will be considered on a parity with reduction of central visual acuity to 5/200 (1.5/60) or less for all purposes including entitlement under \$3.350(b)(2) of this chapter; not however, for the purpose of §3.350(a) of this chapter. Entitlement on account of blindness requiring regular aid and attendance, §3.350(c) of this chapter, will continue to be determined on the facts in the individual case.

6081 Scotoma, pathological, unilateral:

RATINGS FOR IMPAIRMENT OF FIELD VISION-Continued

	Rat- ing
Large or centrally located, minimum	10

RATINGS FOR IMPAIRMENT OF MUSCLE FUNCTION [6090 Diplopia (double vision)]

Degree of diplopia	Equiva- lent visual acuity
(a) Central 20°	5/200
(b) 21° to 30°:	
(1) Down	15/200
(2) Lateral	20/100
(3) Up	20/70
(c) 31° to 40°:	
(1) Down	20/200
(2) Lateral	20/70
(3) Up	20/40
Note: (1) Correct diagnosis reflecting diagnos or	

Note: (1) Correct diagnosis reflecting disease or injury should be cited ..

Note: (2) The above ratings will be applied to only one eye. Ratings will not be applied for both diplopia and decreased visual acuity or field of vision in the same eye. When diplopia is present and there is also ratable impairment of visual acuity or field of vision of both eyes the above diplopia ratings will be applied to the poorer eye while the better eye is rated according to the best corrected visual acuity or visual

Note: (3) When the diplopia field extends beyond more than one quadrant or more than one range of degrees, the evaluation for diplopia will be based on the quadrant and degree range that provide the highest evaluation..

Note: (4) When diplopia exists in two individual and separate areas of the same eye, the equivalent visual acuity will be taken one step worse, but no worse than 5/200..

6091 Symblepharon.

Rate as limited muscle function, diagnostic code

6092 Diplopia, due to limited muscle function... Rate as diagnostic code 6090...

 ⁵ Also entitled to special monthly compensation.
 6Add 10 percent if artificial eye cannot be worn; also entitled to special monthly compensation.

[29 FR 6718, May 22, 1964, as amended at 34 FR 5062, Mar. 11, 1969; 40 FR 42537, Sept. 15, 1975; 41 FR 11297, Mar. 18, 1976; 43 FR 45354, Oct. 2, 1978; 51 FR 6411, Feb. 24, 1986; 53 FR 30264, Aug. 11, 1988; 53 FR 50955, Dec. 19, 1988; 57 FR 24364, June 9, 1992]

IMPAIRMENT OF AUDITORY ACUITY

§ 4.85 Evaluation of hearing impairment.

- (a) An examination for hearing impairment for VA purposes must be conducted by a state-licensed audiologist and must include a controlled speech discrimination test (Maryland CNC) and a puretone audiometry test. Examinations will be conducted without the use of hearing aids.
- (b) Table VI, "Numeric Designation of Hearing Impairment Based on Puretone Threshold Average and Speech Discrimination," is used to determine a Roman numeral designation (I through XI) for hearing impairment based on a combination of the percent of speech discrimination (horizontal rows) and the puretone threshold average (vertical columns). The Roman numeral designation is located at the point where the percentage of speech discrimination and puretone threshold average intersect.
- (c) Table VIa, "Numeric Designation of Hearing Impairment Based Only on Puretone Threshold Average," is used to determine a Roman numeral designation (I through XI) for hearing impairment based only on the puretone threshold average. Table VIa will be used when the examiner certifies that

use of the speech discrimination test is not appropriate because of language difficulties, inconsistent speech discrimination scores, etc., or when indicated under the provisions of §4.86.

- (d) "Puretone threshold average," as used in Tables VI and VIa, is the sum of the puretone thresholds at 1000, 2000, 3000 and 4000 Hertz, divided by four. This average is used in all cases (including those in §4.86) to determine the Roman numeral designation for hearing impairment from Table VI or VIa.
- (e) Table VII, "Percentage Evaluations for Hearing Impairment," is used to determine the percentage evaluation by combining the Roman numeral designations for hearing impairment of each ear. The horizontal rows represent the ear having the better hearing and the vertical columns the ear having the poorer hearing. The percentage evaluation is located at the point where the row and column intersect.
- (f) If impaired hearing is service-connected in only one ear, in order to determine the percentage evaluation from Table VII, the non-service-connected ear will be assigned a Roman Numeral designation for hearing impairment of I, subject to the provisions of § 3.383 of this chapter.
- (g) When evaluating any claim for impaired hearing, refer to §3.350 of this chapter to determine whether the veteran may be entitled to special monthly compensation due either to deafness, or to deafness in combination with other specified disabilities.
 - (h) Numeric tables VI, VIA*, and VII.